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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	806
OMB APP	
OMB Number:	3235-0076
Expires:	May 31, 2005

OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response16.00

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UNIFORM CHAITED OF FERING EXEMI	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Artis Partners (Institutional), L.P.: Offering of Limited Partnership Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08056865
Artis Partners (Institutional), L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
One Market Plaza, Steuart Street Tower, Suite 2700, San Francisco, California 94105	(415) 344-6200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same as executive offices.	Telephone Number (Including Area Code)
Brief Description of Business	2
Securities investment	\triangleright
	DDOOFGAR
Type of Business Organization corporation Imited partnership, already formed other (p	please specify):
corporation Imited partnership, already formed other (p	ALIO O
Month Year	PROCESSED AUG 0 6 2008 THOMSON REUTERS
Actual or Estimated Date of Incorporation or Organization: 0 4 0 3 Actual Esti	mated TLION (CO.)
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	THOMSON REUTERS
CN for Canada; FN for other foreign jurisdiction)	DE
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	. A notice is deemed filed with the U.S. Securities slow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street. N.W. Washington, D.C 20	2549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only repo	ort the name of the issuer and offering, any changes
thereto, the information requested in Part C, and any material changes from the information previously supplent be filed with the SEC.	ied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State:	also of convision in those states that have adopted
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law this notice and must be completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal appropriate federal notice will not result in a loss of an available state exemption unit filing of a federal notice.	exemption. Conversely, failure to file the ess such exemption is predictated on the

		BASIC IDE	NTIFICATION DATA		
2. Enter the information re	quested for the follo	owing:			
 Each promoter of the 	issuer, if the issuer	r has been organized wit	hin the past five years,		
 Each beneficial owner 	having the power to	vote or dispose, or direct	the vote or disposition of,	, 10% or more of a	class of equity securities of the issuer;
• Each executive office	r and director of co	rporate issuers and of cor	rporate general and mana	ging partners of p	artnership issuers; and
· Each general and ma	naging partner of p	artnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				•
Artis Capital Managem					
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code	:)		
One Market Plaza, Steu	art Street Tower	, Suite 2700, San Fra	ncisco, California 94	105	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Artis Capital Managem	ent, Inc. (Genera	al Partner of Artis Ca	pital Management, L.	P.)	
Business or Residence Addre					
One Market Plaza, Steu	art Street Tower	, Suite 2700, San Fra	incisco, California 94	105	·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Peterson, Stuart L.					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Cod	e)		
One Market Plaza, Steu	art Street Tower	r, Suite 2700, San Fra	ncisco, California 94	105	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)				
Moodey, Todd			, ,		
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Cod	e)	· · · · · · · · · · · · · · · · · · ·	
One Market Plaza, Ster	art Street Towe	r, Suite 2700, San Fra	ancisco, California 94	105	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Riemer, Robert A.					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Cod	e)		
One Market Plaza, Ster	art Street Towe	r, Suite 2700, San Fra	ancisco, California 94	105	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addr	ess (Number and S	treet, City, State, Zip Cod	le)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	··			
Business or Residence Adda	ress (Number and S	treet, City, State, Zip Coc	de)		
	(Lla: El-	1 1 -1 1	additional conies of this sh	eat or nanarrows)	

				В.	INFORMA	TION ABO	UT OFFER	ING				
								.1.1 00	0		Yes	No
I. Has the	issuer solo	i, or does					investors : n 2, if filing				🛚	×
2. What is	tha minim	um invact									c 1.00	0,000.00*
					-		m investme				Yes	No
3. Does the										·····		
If a perso or states, a broker	ion or simi on to be list list the na- or dealer,	ilar remund ted is an as me of the l you may	eration for s sociated pe proker or de set forth th	solicitation erson or ag saler. It mo	of purchasent of a broomer than five	ers in conr oker or deal e (5) person	be paid or nection with ler registere ns to be lister r dealer on	sales of se d with the ed are asso	curities in SEC and/o	the offerin or with a sta	ig. ate	
Full Name	(Last name	first, if in	dividual)									
Business or	Residence	e Address (Number ar	nd Street, C	City, State,	Zip Code)			·········			
Name of A	ssociated I	Broker or I	Dealer									
States in W	hich Perso	on Listed I	las Solicite	d or Inten	ds to Solici	it Purchase	rs					
(Checl	k "All State	es" or chec	k individua	l States)							🔲 A	II States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] {ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Business o				nd Street,	City, State	, Zip Code)					
Name of A	ssociated l	Broker or l	Dealer					. ,				
States in V	hich Pers	on Listed	Has Solicit	ed or Inter	ids to Solic	it Purchase	ers					
(Chec	k "All Stat	es" or chec	k individua	l States)			• • • • • • • • • • • • • • • • • • • •	••••			🗆 🗸	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last name	e first. if in	dividual)						···			•
Business o	r Residenc	e Address	(Number a	ind Street,	City, State	, Zip Code)					
Name of A	ssociated	Broker or	Dealer								<u>.</u>	
States in V	Vhich Pers	on Listed	Has Solicit	ed or Inter	nds to Solic	it Purchas	ers				······	
(Chec	k "Ali Stat	es" or che	k individu	al States)							D	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	(AR) [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0.00	\$ 0.00
	Equity		§ 0.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ 0,00	\$_0.00
	Partnership Interests		\$ 271,957,887.00
	Other (Specify)		§ N/A
	Total		\$ 271,957,887.00
	Answer also in Appendix, Column 3, if filing under ULOE.	·	-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	62	\$ 271,957,887.00
	Non-accredited Investors	0	\$ 0.00
	Total (for filings under Rule 504 only)	N/A	\$_N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A	\$ N/A \$ N/A
	Rule 504		
	1.0181	N/A	§ N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	2	\$ 0.00
	Printing and Engraving Costs		S 0.00
	Legal Fees.		\$ 25,000.00
	Accounting Fees		\$ 0.00
	Engineering Fees		₹ \$ 0.00
	Sales Commissions (specify finders' fees separately)		<u>s 0.00</u>
	Other Expenses (identify) Misc. Operating Expenses		\$ 5,000.00
	Total	j	\$ 30,000.00

OFFERING PRICE,	NUMBER OF	INVESTORS,	EXPENSES AND	USE OF PROCEEDS

	and total expenses furnished in response to Part C-Question	ion 4.a. This difference is the adjusted gross		\$ 499,970,000.00
5.	each of the purposes shown. If the amount for any purposes the box to the left of the estimate. The total of the purposes the box to the left of the estimate.	pose is not known, furnish an estimate and payments listed must equal the adjusted gross		
			Payments to	
			Officers.	D
			Affiliates	Others
	Salaries and fees		S 0.00	№ \$ ^{0.00}
	Purchase of real estate		№ \$ 0.00	
	Purchase, rental or leasing and installation of machiner	ry		_
				₹ \$ 0.00
	Acquisition of other businesses (including the value of	securities involved in this	_	
	offering that may be used in exchange for the assets or	4.a. This difference is the "adjusted gross the issuer used or proposed to be used for eis not known, furnish an estimate and ments listed must equal the adjusted gross estion 4.b above. Payments to Officers. Directors, & Payments to Affiliates Others S 0.00 S 0.00		
	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b above. Payments to Officers. Officers. Payments to Some Discussion of the officers of the Some Discussion of the officers of the Some Discussion of the University of Some Discussion of Officers of Some Di			
			_	
	Other (specify):		. 🔀 \$	\$ 0.00
			. 🔀 S 0.00	\$ 50.00
				\$_499,970,000.00
	Total Payments Listed (column totals added)		⋉ \$ <u>.49</u>	9,970,000.00
	I	D. FEDERAL SIGNATURE		
sie	nature constitutes an undertaking by the issuer to furnish	to the U.S. Securities and Exchange Comm	ission, upon writter	le 505, the following request of its staff,
1	(Print or Type)	anatures 4 10 a	Date	
	· · · · · · · · · · · · · · · · · · ·	Ball Moby		
Na	me of Signer (Print or Type) Tit	tle of Signer (Print or Type)	I.D. cb- C	Canada Damana of the
T	dd Maaday	•	gement, L.P., the C	eneral ratiner of the

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.)

		E. STATE SIGNATURE
1.		2 presently subject to any of the disqualification Yes No
	;	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes t D (1 7 CFR 239,500) at such times as requ	to furnish to any state administrator of any state in which this notice is filed a notice on Formired by state law.
3.	The undersigned issuer hereby undertake issuer to offerees.	s to furnish to the state administrators, upon written request, information furnished by the
4.	limited Offering Exemption (ULOE) of th	e issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform the state in which this notice is filed and understands that the issuer claiming the availability solishing that these conditions have been satisfied.
	uer has read this notification and knows the co thorized person.	ontents to be true and has duly caused this notice to be signed on its behalf by the undersigned
	Print or Type) Partners (Institutional), L.P.	Signardre Date 7.2.08
Name (I	Print or Type)	Title (Print or Type)
Todd l	Moodey	Chief Operating Officer of Artis Capital Management, L.P., the General Partner of the Issuer

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AF	PENDIX		-		
1	Intend to non-a	to sell ccredited s in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of security and aggregate offering price offered in state Type of investor and amount purchased in State					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL			•						
AK									
ΑZ									
AR									
CA		X	\$500,000,000.00	9	\$21,947,902.52	•			X
СО		×	\$500,000,000.00	3	\$2,280,735.12				X
СТ		X	\$500,000,000.00	2	\$15,200,000.00				×
DE									
DC									
FL									
GA									
н									
ID									
ΠL		X	\$500,000,000.00	6	\$52,274,096.42				X
IN									
IA									
KS									
KY									
LA									
ME									
МD		X	\$500,000,000.00	1	\$500,000.00				X
MA									
МІ									
MN		×	\$500,000,000.00	1	\$562,441.45				X
MS									

	· · · · · · · · · · · · · · · · · · ·			APP	ENDIX				
1	Intend	s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо		X	\$500,000,000.00	1	\$4,065,485.61				X
МТ									·
NE									
NV									
NH									
NJ		X	\$500,000,000.00	5	\$16,752,639.88				×
NM		X	\$500,000,000.00	1	\$1,019,438.88				X
NY		X	\$500,000,000.00	23	\$143,576,932.00				X
NC		X	\$500,000,000.00	2	\$3,878,992.16				X
ND									
ОН									
ОК									
OR							•		
PA									
RI									
SC									
SD									
TN		X	\$500,000,000.00	1	\$1,000,000.00				×
TX		X	\$500,000,000.00	1	\$2,531,722.49				×
UT									
VT									
VA									
WA									
wv									
WI									

				APPI	ENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pu (Part	·	under Sta (if yes, explana	ation of granted)	
State	Yes	No _.	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

Offshore

X

\$500,000,000.00

4

\$10,115,501.23

6100-5\1246229

END